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APPLICANTS

Douglas A. Hettrick, Blaine, MN;

David E. Euler, Maple Grove, MN;

Eduardo N. Warman, Maple Grove, MN; Michael R. Ujhelyi, Maple Grove, MN;

Rahul Mehra, Stillwater, MN;

Paul D. Ziegler, Minneapolis, MN;

Shailesh Kumar V. Musley, Blaine, MN;

Charles E. Distad, St. Paul, MN;

David E. Ritscher, Minneapolis, MN;

** CONTINUING DATA *****

— NONE — SJ 5/9/06

** FOREIGN APPLICATIONS *****

— NONE — SJ 5/9/06

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	MN	5	42	5

ADDRESS

27581

MEDTRONIC, INC.

710 MEDTRONIC PARK

MINNEAPOLIS, MN

55432-9924

TITLE

Control of atrial defibrillation therapy based on hemodynamic sensor feedback

FILING FEE RECEIVED 1468	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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